MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE W FORM PTO-875)

107532982 03° JUN 2005 APPLICANT(S)

CLAIMS

	AS FILED		AFTER SAMENDMENT		AFTER 2 ** AMENDMENT			AS FILED		AFTER		AFTER 2 MANENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						DEI.
2							52						
3							53						
5				',			54						
6				-/-		<u> </u>	55						
7		l		-/-		 	56 57						<u> </u>
. 8		ii		1		<u> </u>	58			<u> </u>			
9				7			59						
10				/			60						
11							61						
12							62						
13							63						
14							64						
15							65						
16				_/_			66						
17							67						
18							68						
19							69						
20				-/,-			70	·					
21 22				-4			71						
23				-/-			72			<u>-</u>			
24				-/-			73						
25					-		74 75						
26				-4-			76						
27				'			77						
28				/	_		78						
29					-		79	_					
30							80						
31							81_						
32							82						
33							83						
34		·					84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
42							92						
43							93						
44							94						
45							95						
46		***					96						
47							97				i		
48							98						
49							99	I					
50						·	100]			
OTAL IND.		1	/	1			TOTAL IND.	1	1		1	.]	1
OTAL DEP		4	27	4		4 a	TOTAL DEP.		4		4		42
TOTAL CLAIMS			28				TOTAL CLAIMS	I					
CLANTING					·		CLANIS		II S DEPART	MENT of CO		1	Company of the last